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## \*BIBDATASHEET\*

CONFIRMATION NO. 8017

Bib Data Sheet

|                             |                                       |              |                        |                                   |
|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|
| SERIAL NUMBER<br>10/615,201 | FILING DATE<br>07/07/2003<br><br>RULE | CLASS<br>607 | GROUP ART UNIT<br>3762 | ATTORNEY DOCKET NO.<br>279.090US6 |
|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|

## APPLICANTS

Jiang Ding, Shoreview, MN;

Yinghong Yu, Maplewood, MN;

Andrew P. Kramer, Minneapolis, MN; Julio Spinelli, Shoreview, MN;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 10/243,811 09/13/2002 PAT 6,684,103  
 which is a CON of 10/008,830 12/07/2001 PAT 6,542,775  
 which is a CON of 09/661,608 09/14/2000 PAT 6,351,673  
 which is a CON of 09/492,911 01/20/2000 PAT 6,360,127  
 which is a CON of 09/075,278 05/08/1998 PAT 6,144,880

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/02/2003

|   |   |                           |                        |                       |                            |
|---|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR<br>COUNTRY<br>MN | SHEETS<br>DRAWING<br>7 | TOTAL<br>CLAIMS<br>28 | INDEPENDENT<br>CLAIMS<br>1 |
| Verified and Acknowledged                                   | Examiner's Signature _____<br>Initials _____  |                           |                        |                       |                            |

## ADDRESS

21186  
 SCHWEGMAN, LUNDBERG, WOESSNER & KLUTH, P.A.  
 P.O. BOX 2938  
 MINNEAPOLIS, MN  
 55402

## TITLE

Cardiac pacing using adjustable atrio-ventricular delays

|            |   |  |
|------------|---|--|
| FILING FEE | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) |
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